

TOWN OF CHESTER PARKS AND RECREATION
2016 SUMMER CAMP PROGRAM

RULES AND REGULATIONS

- 1) Camp runs daily from 8:30am to 2:30pm for all campers, at Chester Academy, 64 Hambletonian Avenue. Children are to arrive no earlier than 8:20am. We also ask that you not sign your child in or out after 1:00pm. Children are to be picked up promptly at 2:30pm. A late pickup fee of \$10.00 will begin at 2:40pm and increase by \$10.00 every half-hour. (i.e. 2:40-3:10 = \$10.00, 3:10-3:40 = \$20.00). If we have not received a phone call by 3:00 letting us know the child is being picked up late, we will call your emergency contact person. After 3:30pm, we will contact the Town Police for assistance.
- 2) At the completion of registration, refund requests will not be granted
- 3) Any child who arrives late or departs early must have their parent/guardian sign them in or out with the camp office.
- 4) No child shall be allowed to attend the Chester Parks and Recreation Summer Camp without a current Medical History, an Updated Immunization Record, and an emergency phone number.
- 5) Children must stay with their group throughout the day. Counselors will accompany children to and from the medical person, bathrooms, etc. However, it is the responsibility of the parent or guardian to stress to their children the importance of remaining with their group and on the premises at all times during the program.
- 6) NO TOYS or ELECTRONICS are to be brought to the camp, as we cannot be responsible for their loss or damage.
- 7) CHILDREN MUST BRING A LUNCH TO CAMP EVERYDAY. Please be aware that there is NO REFRIGERATION available. We will NOT be responsible for personal property that is brought to camp. The child's first and last name should be on any clothing or lunch items brought to camp.
- 8) The facilities and equipment are not to be misused or damaged. Any child found misusing or damaging the facilities or camp equipment will be suspended immediately from the program and expected to replace anything damaged.
- 9) No motorized vehicles (ATV's, moped, etc.) are allowed at camp.
- 10) All children should dress in cool clothing and wear socks and sneakers as the camp area includes outdoor fields and playgrounds, as well as indoor facilities. Children will be very active throughout the day both inside and outside. However, we do try to adjust our schedule according to the temperature and any precipitation. Children should not wear their best clothing, as they might get dirty participating in arts and crafts activities.

Any child who does not follow the above rules at camp will be suspended from the program immediately for the duration of the program. The summer camp director and camp staff will address any discipline issues. We have a no tolerance policy when it comes to hitting, teasing, or name-calling! It is up to the camp director to determine appropriate action based on the severity of a specific incident.

TOWN OF CHESTER PARKS AND RECREATION
2016 SUMMER CAMP
HELD AT THE CHESTER ACADEMY
64 HAMBLETONIAN AVE

DROP OFF AND PICK UP INFORMATION

At morning drop off, the camp staff will be waiting outside to receive your children. Please follow the arrows to keep traffic flowing. If possible, please just pull up to the curb and allow your child to get out of the car. There is no need to park.

At pick up, we require all parents to come into the gymnasium to sign out their campers promptly at 2:30pm. Campers will not be ready for dismissal before 2:30 due to afternoon announcements and distribution of arts and crafts projects.

Below is some additional information we need you to know:

Late Campers and Early Pick-ups: Parents must come to the camp office located by the Gym area. All campers must be signed in or out at the camp office. Please write a note for early pick-up and we will try to have your child waiting in the camp office.

Late pick-up: While we understand that “things happen”, please make every effort to pick up your camper by 2:30pm. If you are going to be late, please call the camp office to let the staff know (phone number to follow). When we have a late child, we must pay a counselor to stay until the child is picked up. Anyone picking his or her camper up after 2:40pm will be charged a late fee of \$10.00 per half hour as follows: 2:40pm to 3:10pm will be a \$10.00 fee; 3:10pm to 3:40pm will be a \$20.00 fee, etc.

If the camper has not been picked up by 3:00pm and we have not received a phone call from you, and we cannot contact you, we will call the emergency contact(s) listed on your child's registration form. After 3:30pm, if we have been unable to contact anyone, we will contact the Town Police for assistance.

Emergency Plan: While we do not for see any emergency situations, if the summer camp were required to evacuate from the Chester Academy for any reason, we would walk the campers to the Chester Elementary School, and remain there until otherwise instructed.

PLEASE NOTE:

- 1) CAMP IS CLOSED ON JULY 4th IN OBSERVANCE OF THE FOURTH OF JULY.
- 2) THE LAST DAY OF CAMP (AUG 5) CAMPERS WILL BE DISMISSED AT 11:30.

Thank you in advance for you cooperation in these matters. It will help our summer camp run more smoothly. If you have any questions or concerns regarding this information, please contact us at 469-7000 ext. 8.

**TOWN OF CHESTER PARKS AND RECREATION
2016 SUMMER CAMP REGISTRATION FORM**

CAMPER INFORMATION:

Child's Name: _____ Home Telephone: _____

Date of Birth: _____ Grade as of Fall 2016: _____ Shirt Size: _____

Home Address: _____

PARENT/GUARDIAN INFORMATION:

Mother/Guardian Name: _____ Business/Cell Phone: _____

Email: _____

Father/Guardian Name: _____ Business/Cell Phone: _____

Email: _____

Address (if different from campers): _____

Are there any court orders, custody issues, or protective orders involving this camper? _____ Y _____ N
(If yes, please note the important details on the back of this form.)

EMERGENCY CONTACTS: (Please list the names and telephone numbers, other than a parent, who have your permission to sign out/pick up your child if you are unable to.)

Name: _____ Home/Cell Phone: _____

Name: _____ Home/Cell Phone: _____

Family Doctor: _____ Telephone: _____

Any special notes about this child (allergies, appliances worn, prescription drugs, special needs, etc.)

SESSION CHOICE

Session 1 _____ (6/27-7/8) Session 2 _____ (7/11-7/22) Session 3 _____ (7/25-8/5)

At this time, please include full payment for all sessions. Each session is \$195.00 for Chester Residents (*Town of Chester Property Tax Payee*) and \$225.00 for Non-Residents. Make checks or money orders payable to: The Town of Chester. **CASH WILL NOT BE ACCEPTED. Immunization documentation must accompany each registration.** At the completion of registration, refund requests will not be granted.

I have filled out this form to the best of my knowledge. If there are any changes of my address, phone numbers, emergency contact(s), or doctor's information, I will inform the camp in order to up date my child's record.

Parent/Guardian Signature: _____ Date _____

-----OFFICE USE ONLY-----

Date check received: _____ Check #: _____ Name on Check: _____

Receipt Number: _____ Siblings: _____

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MEDICAL HISTORY

The Chester Park and Recreation Camp Program is certified through the Orange County Health Department. In accordance with section 7-2.8 of the New York State Sanitary Code, a current confidential medical history, including Immunization dates and emergency contact telephone numbers, shall be kept on file for every camper and **updated annually.**

CHILD'S NAME: _____

IMMUNIZATION UPDATES

Every child must have a new copy of his/her immunization records submitted each summer prior to entering camp. If you are submitting a copy of the immunization records with this form, please write see attached.

DPT, DT _____

POLIOMYELITIS _____

MEASLES _____

MUMPS _____

CHICKEN POX _____

RUBELLA _____

MMR _____

HEPATITIS _____

Please list any food and/or drug allergies/reactions that affect this child:

Please list any medical conditions/concerns that affect this child:

Parent/Guardian Signature

Date

TOWN OF CHESTER PARKS AND RECREATION
2016 SUMMER CAMP

MEDICAL PERMISSION

I, the undersigned, as parent/guardian of _____,
(Child's Name)
understand that the Chester Parks & Recreation Camp Program will include an array of both sports and recreational activities typically made available to the children at the summer camp. The kind of activities may include contact sports, such as: soccer, basketball, field hockey, dodge ball, volleyball, roller-skating, and the like. These activities and others of similar nature will involve vigorous activity on the part of the children and, although all possible measures will be taken to insure the safety of each camper, the possibility of camper injury does exist.

The undersigned, as parent/legal guardian of the camper, does hereby grant permission to the staff of the Town of Chester Parks and Recreation Summer Camp to administer emergency first aid to the child named above as deemed necessary. In the event an injury requires treatment beyond the scope of the Camp facilities, an Emergency Medical Technician (EMT) may be requested. Once the EMT is on site, decisions regarding a camper's medical treatment will be subject to the EMT's discretion. Treatment may include transport to and care provided by the Orange Regional Medical Center, the closest medical facility, or other facilities.

Parent/Guardian Signature

Date

Does your camper have medical insurance? _____Y _____N

If yes, please give us: Insurance Provider: _____

Policy Number: _____

Contact Information: _____

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MEDICAL PROCEDURE

IN THE EVENT THAT A CHILD REQUIRES MEDICINE WHILE PARTICIPATING IN THE TOWN OF CHESTER PARKS AND RECREATION SUMMER CAMP PROGRAM, THE FOLLOWING PROCEDURE IS TO BE FOLLOWED.

As per our certification as a Summer Day Camp in The County of Orange, State of New York, no child may be in possession of any medical substance, which has been prescribed by a physician. The following procedure must be followed:

- A. The parent/guardian of the child shall personally deliver the medication along with written instruction for this medication from a physician to the Camp Medical Director. The written instructions shall include the following information: name of the medication, reason for giving the medication, dosage, time and number of days to be given.
- B. The medication must be in the container provided by a registered pharmacist and have the professional label affixed thereto.
- C. UNDER NO CIRCUMSTANCES is a child allowed to bring medication to the Camp Program.
- D. The parent/guardian must submit a written request to the Medical Director to give the medication as directed by the physician.
- E. A parent/guardian must pick-up all unused medication within three days after the final dosage is administered.

I, being the parent/guardian of _____ have read the above
(Child's Name)
procedure and agree to follow precisely as written.

Signature Parent/Guardian

Date

PARTICIPANT'S ACTIVITY WAIVER

PARTICIPANT'S NAME: _____

DATE OF BIRTH: _____

ADDRESS: _____

CITY: _____

PHONE: _____

NATURE OF ACTIVITY: _____

WAIVER OF PHYSICAL DAMAGE OR INJURY

IN CONSIDERATION OF ACCEPTING THIS ACTIVITY I, THE UNDERSIGNED INDIVIDUAL DO HEREBY RELEASE AND HOLD HARMLESS THE TOWN OF CHESTER, ITS ELECTED OR APPOINTED OFFICIALS, EMPLOYEES AND VOLUNTEERS FROM ANY AND ALL CLAIMS, LAWSUITS, OR LOSS RESULTING FROM THE BODILY INJURY OR PROPERTY DAMAGE AS A RESULT IN MY PARTICIPATION IN CONNECTION WITH THE ACTIVITY OF SUMMER CAMP. I ALSO ATTEST AND VERIFY THAT I AM PHYSICALLY FIT AND CAPABLE OF SAID ACTIVITY AND UNDERSTAND THAT THIS ACTIVITY COULD BE HAZARDOUS.

(PARTICIPANT'S SIGNATURE)

(PARENT SIGNATURE – FOR MINORS UNDER THE AGE OF 18)

Town of Chester Parks and Recreation
2016 Field Trip Permission Slip

This form will serve as a general permission slip for the named camper to attend all sanctioned Summer Camp field trips as described below.

- 1) By signing this permission slip, I give my camper permission to attend the trips listed on the camp schedule. Without this signed slip, I understand that my camper will not be allowed to attend any planned trips.
- 2) I understand that with this document, my camper will attend the summer camp field trip if they are present at the camp on the day of the trip. If your camper is not going on the trip, please keep them home on this day, as regular camp will be closed.
- 3) I understand that my camper will be transported by buses contracted by the Town of Chester
- 4) I understand that the employees of the Town of Chester Summer Camp will appropriately supervise my camper during the field trip, and that campers are responsible for behaving themselves in a manner that will ensure their personal safety and the safety of other campers.
- 5) I understand that if my camper behaves inappropriately on any trip, Town of Chester has the right to request the camper not attend other planned trips.
- 6) I understand that for every trip, my camper needs to have a brown bag lunch.
- 7) I understand that spending money is optional.

If you have any questions or concerns, please contact the Town of Chester Parks and Recreation at 469-7000 extension 8.

Please sign and return the bottom portion of this sheet at registration. If your camper is attending more than one session, only one signed permission slip is necessary. If you have more than one camper, permission for each camper is required.

By signing this permission slip, I give my camper permission to attend the trips indicated.

Camper's Name

Parent/Guardian Signature

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PHOTO PERMISSION SLIP

By signing this permission slip, I give permission for the Town of Chester to post photographs of my child on the Town of Chester website.

Please be aware that if we do post a picture of your child, no names will be used.

Camper's Name: _____

_____ Yes, I give permission for my child's picture to be posted on Chester's website.

_____ No, I do not give permission for my child's picture to be posted on Chester's website

Parent/Guardian signature

Date